

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1414655

OMB APPROVAL							
OMB Number: 3235-0076							
April	130,2008						
Estimated average burden							
hours per response 16.00							
	er: Apri	per: 3235-007 April 30,2008 average burden					

SEC	USE O	VLY
Prefix		Serial
	_	
DA	TE RECEIV	ED

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Hualalai - Kukio Luxury Estates, LP	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	.
1. Enter the information requested about the issuer	07079559
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	-
Hualalai - Kukio Luxury Estates, LP	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone !	Number (Including Area Code)
72-163 Kumukehu, Unit 2101, Kailua Kona, Hawaii 96740 949-500-177	0
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone (if different from Executive Offices)	Number (Including Area Code)
Brief Description of Business	
Luxury residential real estate project	
Type of Business Organization corporation business trust Imited partnership, already formed business trust imited partnership, to be formed other (please specify):	PROCESSED
	OCT 1 1 2007
Month Year Actual or Estimated Date of Incorporation or Organization: OB . OLZ Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada: FN for other foreign jurisdiction)	THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

					A. BASIC IDE	ENTI	ICATION DATA				
2. Enter the	information re	queste	d for the fol	llowin	g:	,					
• Each	promoter of t	he issi	er, if the iss	suer h	as been organized w	ithin t	the past five years;				
								of, 10	% or more o	f a clas	s of equity securities of the issuer
 Each 	executive off	icer an	d director o	f corp	orate issuers and of	согра	rate general and man	aging	partners of	fpartne	ership issuers; and
• Each	general and r	nanagi	ng partner o	f parti	nership issuers.			•			
Check Box(es)	that Apply	[]	Promoter		Beneficial Owner	[7]	Executive Officer	127	Director	[7]	General and/or
Check Pox(cs)	mai Appiy.		i romote:		peneneral Owner	₩.	Executive Officer		Director	₩ J	Managing Partner
Full Name (Las	t name first i	f indix	ridual)				 -				
Swartz, Larry			,								
Business or Re		ss (1	Number and	Street	, City, State, Zip Co	ode)					
1 Barranca V						,					
Check Box(es)	that Apply:		Promoter	П	Beneficial Owner		Executive Officer	П	Director	7	General and/or
		_				_				·	Managing Partner
Full Name (Las	t name first, i	f indiv	ridual)								
ABS Develop	ment Corpo	ration	ו								
Business or Re	sidence Addre	ss (ì	Number and	Street	. City, State, Zip Co	ode)	···-				
72-163 Kumu	kehu, Unit 2	101, 1	Kailua Kon	a, Ha	waii 96740						
Check Box(es)	that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or
											Managing Partner
Full Name (Las	t name first, i	f indiv	/idual)								
Business or Re	sidence Addre	ss (1	Number and	Street	. City, State, Zip Co	ode)	· <u>-</u>				
Check Box(es)	that Apply:	$_{.}\square$	Promoter		Beneficial Owner		Executive Officer		Director		General and/or
									_		Managing Partner
Full Name (Las	t name first, i	f indiv	ridual)								
Business or Re	sidence Addre	:ss (1	Number and	Street	, City, State, Zip Co	ode)					
Chaole Boy(es)	that Annles		Deamater	_	DanaGaial Owner		Evenuive Office		Disastus		Concert wedden
Check Box(es)	шас Арріў.	H	Promoter	L	Beneficial Owner	Ц	Executive Officer	L	Director	Ш	General and/or Managing Partner
Full Name (Las	t name first i	findis	zidual)						-		<u> </u>
Tun ragne (Eus	a nume mot, i	, ,,,,,,,,	Todar,								
Business or Re	sidence Addre	ess (l	Number and	Street	, City, State, Zip Co	ode)					
					, 6.0, 6.000, 200	,					
Check Box(es)	that Apply:		Promoter		Beneficial Owner		Executive Officer	П	Director	\neg	General and/or
		س.		_		_		ت			Managing Partner
Full Name (Las	t name first, i	f indiv	ridual)							·	
Business or Re.	sidence Addre	ss (l	Number and	Street	, City, State, Zip Co	ode)	· · · · · · · · · · · · · · · · · · ·		-		·
Check Box(es)	that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or
											Managing Partner
Full Name (Las	t name first, i	f indiv	ridual)								

Business or Residence Address (Number and Street, City, State, Zip Code)

					B. 18	NFORMATI	ON ABOU	T OFFERE	NG				
1.	Hac the	icenar cole	d or does th	sa icenar ir	stand to se	II to non a	ooradited is	nvectore in	thic offeri	na?		Yes	No
••	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										***************************************		X
2.												s_50,0	00.00
	Does the offering permit joint ownership of a single unit?											Yes	No
3.													Z
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. N/A												
Ful	l Name (Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (N	lumber and	Street, C	ty, State, Z	ip Code)						
Nar	ne of As	sociated Br	roker or De	aler			·						
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers				· ·		
	(Check	"All State:	s" or check	individual	States)	• • • • • • • • • • • • • • • • • • • •	***************	***************************************		**************		☐ All	States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if indi	ividual)								_	<u> </u>
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)					<u> </u>	
Nar	me of As	sociated Bi	roker or De	aler									
Sta	tes in Wi	ich Persor	Listed Has	s Solicited	or Intends	to Solicit I	Purchasers				<u> </u>		
	(Check	"All State:	s" or check	individual	States)				***************************************		***************************************	□ VI	States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO I.A NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)	•		·			_ _ _
Nai	me of As	sociated B	roker or De	aler			<u>. </u>						
Sta	tes in Wi	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	<u>-</u>		<u> </u>			
	(Check	"All State:	s" or check	individual	States)	***************************************		***************************************	**********	•••••		☐ A1	l States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ČT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Aiready Sold
	Debt	<u> </u>	s
	Equity		
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	S	\$ _
	Partnership Interests	•	
	Other (Specify)		\$
	Total		\$ 0.00
	Answer also in Appendix. Column 3, if filing under ULOE.		*
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero.".	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$_100,000.00
	Non-accredited Investors	0	\$ 0.00
	Total (for filings under Rule 504 only)	0	\$_0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	N/A	
		Type of	Dollar Amount
	Type of Offering	Security	Solđ
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 40,000.00
	Accounting Fees		\$ 10,000.00
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	<u> </u>
	Other Expenses (identify)	_	\$
	Total	_	\$ 50,000.00

	b. Enter the difference between the aggregate offeri and total expenses furnished in response to Part C — C proceeds to the issuer."			
				\$S,950,000.00
5.	Indicate below the amount of the adjusted gross pro- each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to	
			Officers,	
			Directors, & Affiliates	Payments to Others
	Salaries and fees		\$ 416,000.00	
	Purchase of real estate		\$ 843,000.00	\$ 3,000,000.00
	Purchase, rental or leasing and installation of macl	ninery		
	Construction or leasing of plant buildings and faci		_	" =
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities of another]\$	s
	Repayment of indebtedness		\$	□ s
	Working capital		- \$	
	Other (specify):] \$	s
	······································]\$	
	Column Totals		<u>\$ 1,259,000.00</u>	\$_4,691,000.00
	Total Payments Listed (column totals added)		⊘ \$ <u>5,9</u>	50,000.00
		D. FEDERAL SIGNATURE		
sign	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to furr nformation furnished by the issuer to any non-accr	nish to the U.S. Securities and Exchange Commiss	ion, upon writter	e 505, the following request of its staff,
Issu	er (Print or Type)	Signature _ [Pate / /	
	alalai - Kukio Luxury Estates, LP	MART	10/1/03	7
Nan	e of Signer (Print or Type)	Type ott Signer (Frint or Type)		
arn	/ Swartz	resident of ABS Development Corporation, G	P of Limited Par	tnership

- ATTENTION -

	E. STATE SIGNATURE		
I.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No 🔀
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this not D (17 CFR 239.500) at such times as required by state law.	ice is filed a no	otice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, in issuer to offerees.	formation fur	nished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issue of this exemption has the burden of establishing that these conditions have been satisfied.		
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on i thorized person.	ts behalf by the	undersigned
lssuer (Print or Type) Signayore Date	/ / -	
Hualala	ai - Kukio Luxury Estates, LP	1/07	
Name (I	Print or Type) Tiple (Print of Type)		
Larry S	Swartz President of ABS Development Corporation, GP of Lim	ited Partnersh	nip

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	79 - 27. <u>2</u> 7	may office			AP	PENDIX			87:	
Non-Accredited Investors	1	Intend to non-a investor	l to sell eccredited s in State	Type of security and aggregate offering price offered in state		Type of investor and amount purchased in State				
AK	State	Yes	No		Accredited	Amount	Non-Accredited	Amount	Yes	No
AZ	AL									
AR	AK					<u> </u>				
CA	AZ							\$		
CT	AR									
CT Image: contract of the contract of	CA					_				
DE	CO									
DC Image: square s	СТ									
DC	DE									
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	MI									
MS	MN									
- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MS									

	WE.			APPI	ENDIX			````, \^`,\ [©]	. , .
1	Intendation to non-a	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО		_							
МТ									
NE									
NV									
NH									
NJ									
NM									
NY				<u></u>					
NC									
ND						<u> </u>			
ОН									
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UT									
·VT									
VA									
WA									
wv									
WI									

NOT APPLICABLE - FILING UNDER RULE 506 - Does not intend to sell to any non-accredited investors

				APP	ENDIX		·									
1		2	3			5 Disqualification										
	to non-a	to sell accredited is in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						unde (if Type of investor and exp amount purchased in State wai				der State ULOE (if yes, attach explanation of waiver granted) Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No							
WY																
PR																

